

Meeting Name and date	Trust Board – 4 August 2020.
Paper number	

Name of Report - SAFE STAFFING - JUNE 2020 REVIEW
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For approval		For assurance	<input checked="" type="checkbox"/>	For information	
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Presented by	Anne Scott	Author (s)	Emma Wallis
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Alignment to CQC domains:		Alignment to LPT priorities for 2019/20 (STEP up to GREAT):	
Safe	<input checked="" type="checkbox"/>	S – High Standards	<input checked="" type="checkbox"/>
Effective		T - Transformation	
Caring		E – Environments	
Responsive		P – Patient Involvement	
Well-Led		G – Well-Governed	<input checked="" type="checkbox"/>
		R – Single Patient Record	
		E – Equality, Leadership, Culture	
		A – Access to Services	
		T – Trust wide Quality improvement	
Any equality impact (Y/N)	N		

Report previously reviewed by	
Committee / Group	Date

Assurance: What level of assurance does this report provide in respect of the Organisational Risk Registers?	Links to ORR risk numbers
Partial; Established processes are in place to monitor and ensure staffing levels are safe and that patient safety and care quality is maintained. Due to Covid-19 national and Trust data collection for safe staffing paused, no fill rates against planned staffing or CHPPD.	1,4,26
Recommendations of the report	
The Trust Board is recommended to receive assurance that processes are in place to monitor and ensure the inpatient and community staffing levels are safe and that patient safety and care quality are maintained.	

TRUST BOARD – 4 AUGUST 2020

SAFE STAFFING – JUNE 2020 REVIEW

Introduction/Background

- 1 This report provides an overview of nursing safe staffing during the month of June 2020, including an overview of staffing areas to note, updates in response to the COVID-19 pandemic, potential risks and actions to mitigate the risks to ensure that safety and care quality are maintained.
- 2 The report triangulates workforce metrics, quality and outcomes linked to Nurse Sensitive Indicators (NSIs) and patient experience feedback. A summary is available in Annex 1.

Recommendations

- 3 For the Trust Board to receive assurance that processes are in place to monitor and ensure the inpatient and community staffing levels are safe and that patient safety and care quality are maintained.

Discussion

Trust level highlights for June 2020

Right Staff

- Temporary worker utilisation rate increased slightly this month; 0.3% reported at 16.02% overall. Trust wide agency usage increased this month by 0.02% to 2.12% overall. The decreased bank and agency utilisation over the past months reflects the reduced bed occupancy and flexed staffing levels to meet patient needs.
- This month Griffin and CAMHS inpatient unit utilised over 6% agency staff, the reduction in the number of wards utilising over 6% agency staff reflects the reduced overall temporary worker and agency use across the Trust.
- There are eight inpatient 'areas to note' identified either by; high percentage of temporary worker/agency utilisation or by the Head/Deputy Head of Nursing due to concerns relating to increased acuity, high risk patients, staff sickness, ability to fill additional shifts and the impact to safe and effective care.
- There are five community team 'areas to note'. Staffing and case-loads are reviewed and risk assessed across service teams using patient prioritisation models to ensure appropriate action is taken to maintain patient safety.

Right Skills

- As of 31 May 2020 Trust wide;
 - Appraisal at 84.8% GREEN
 - Clinical supervision improved at 84.1% AMBER
- FFP3 Mask Fit Test training continues. As of 3 July 2020;
 - 847 staff have been successfully mask fit trained.
 - 271 staff have had a fail result
 - 194 staff did not attend the session they were booked onto

Directorates have developed localised fit test training plans with trajectories focusing on achieving 80% of in-patient staff to be fit tested utilising local trainers.

Right Place

- The Trust three 'COVID-19' wards; Beaumont, Gwendolen and East Ward continue to operate to maintain separation between possible and confirmed COVID-19 patients and support patient and staff cohorting.
- Each directorate, led by the Heads of Nursing, has reviewed its inpatient settings and the clinical needs of the patients. Consequently the directorates have developed operational plans for zoning of wards to further support and maintain separation between possible and confirmed COVID-19 patients and staff allocated to care for patients, to eliminate the risk of nosocomial infection.
- As part of the zoning plans East Ward at Hinckley and Bosworth Community Hospital site has been identified as the Red site for COVID 19 positive symptomatic patients. North ward has been identified as the second red ward which ensures that this site remains a red site and reduces risk of transmission and supporting the use of staff across the two red wards. Due to the low numbers of COVID 19 positive patients requiring a community hospital bed, North Ward temporarily stopped admissions on the 17th June 2020.
- The trust made the decision to temporarily suspend admissions to Feilding Palmer Hospital (FPH) on the 14 May 2020 this was in response to national COVID-19: infection, prevention and control guidance and to ensure patient and/or staff safety is not compromised and safety is prioritised. Specific concerns at FPH include space constraints, which do not facilitate:
 - Social distancing of two meters, or
 - Requirement to cohort positive and/or symptomatic patients
- The introduction of zones and adoption of COVID-19 non-admitted care pathways ensures that staff are in the right place, supporting vulnerable staff return to COVID-19 secure areas or Green in-patient areas following assessments for Health/ BAME staff

Staff leave data

- The table below shows absence captured by the HR isolation sheet as at 30 June 2020;

Self-isolate – Household Carer	3
Self-isolate – Household WFH	2
Self-isolate – Symptomatic	73

Self-isolate – Vulnerable Group	146
Undefined	3
Covid related absence	223
General absence	225
Total Workforce	5329
Covid related absence	4.18%
General absence	4.22%
Total absence	8.41%

Table 1 – Trust COVID-19 and general absence – 30 June 2020

In comparison to the previous month as reported on 31 May 2020, overall absence has decreased 1.8% and COVID-19 related absence has reduced by 1.56%.

	AMH	Bank	CHS	Enabling	FYPC	Hosted	LD	MHSOP	Grand total
Self-isolation – Household carer	0	1	1	0	1	0	0	0	3
Self-isolation – Household WFH	0	0	0	0	0	0	2	0	2
Self-isolation – Symptomatic	8	17	36	0	5	1	3	3	73
Self-isolation – Vulnerable Group	34	3	52	7	24	3	11	12	146
Undefined	1	0	1	0	1	0	0	0	3
Totals	43	21	90	7	31	4	16	15	227

Table 2 – COVID-19 absence by Directorate – 30 June 2020

Staff well-being

Throughout the COVID-19 pandemic there have been a number of initiatives to support and enhance staff well-being, a summary of the initiatives;

- 47 ‘Wobble’ rooms created at bases and hubs, a relaxing and calm area for staff to access with fresh fruit and sandwiches
- Good egg nominations- 800+ eggs sent to staff with personal messages from nominees
- Support sheets and guidance created and shared;
 - 5 steps to mental wellbeing during COVID- 19
 - Self-care and self-isolation
 - Looking after your mental health and wellbeing
 - Financial wellbeing
 - Healthy working day
 - Working differently during COVID-19
 - Health virtual meeting checklist and etiquette guidance
- Shielding template letter produced for managers to send to their staff, managers checklist on supporting shielding staff also produced
- Psychological support pathway service set up to sign post staff to services.
- COVID-19 thank you cards created for staff to send to one another.
- COVID-19 buddy system put in place

In-patient Staffing

4 Summary of inpatient staffing areas to note;

Wards	April 2020	May 2020	June 2020
Hinckley and Bosworth - East Ward	X	X	X
Hinckley and Bosworth – North Ward			
Beechwood	X	X	
Clarendon	X	X	
Feilding Palmer	X		
St Lukes Ward 1			X
St Lukes Ward 3	X	X	X
Coalville Ward 2			
Rutland		X	
Coleman			
Gwendolen	X	X	X
Beaumont	X	X	X
Belvoir	X	X	X
Griffin	X	X	X
Agnes Unit			X
Langley			
Bosworth (CAMHS)	X	X	X

Table 3 – In-patient staffing areas to note

- 4 Areas to note are identified either by the Head/Deputy Head of Nursing due to; high percentage of temporary worker/agency utilisation, or concerns relating to; increased acuity, high risk patients, staff sickness, ability to fill additional shifts and the impact to safe and effective care. Covid-19 wards are also identified as areas to note; East Ward Hinckley, Beaumont and Gwendolen Wards.
- 5 Both the Agnes Unit and CAMHS Bosworth are identified as ‘areas to note’ due to a combination of factors; high percentage of temporary worker/agency utilisation, concerns relating to; increased acuity, high risk and vulnerable patients, safeguarding and safety incidents and impact to safe and effective care. Both areas are being supported with quality improvement plans, with oversight to the Trust Quality Assurance Committee, a high level summary of interventions for the Agnes Unit include;
- Two weekly safeguarding multi-disciplinary strategy meetings.
 - A task and finish group to undertake detailed analysis of the reported incident data to understand themes and trends, supported by the Patient Safety Team.
 - Review of the current MAPA training and staff feedback regarding technique
 - Changes to the rota to increase oversight and ensure there is a senior professional visible within the unit at all times
 - Creation and circulation of specific staff communications to provide information on staff support, forums/ access to the Freedom to Speak up Guardian and safeguarding oversight.
 - Safer staffing review and increased registered nurse and leadership presence in Pods and bank and agency use and to ensure safe staffing on shifts. .

- Greater rotation of staff across the unit with current staffing requirements for the 3 shifts throughout the 24 hour period set to a planned level of 17 staff members- with 3 registered nurses working across 4 pods with equitable skills to manage current patient dependency and acuity to respond to clear safe staffing requirements including break cover, response team and level 2 observations.
- The Learning Disability Optimal Staffing Tool is being revisited to measure patient acuity and dependency, data collection commencing Monday 20th July 2020 for a 20 day period.

A quality summit has been arranged for Bosworth Ward with an external facilitator as a positive, safe and proactive long term forum to support practice improvement. The initial sessions are on 20 and 24 July 2020. The focus of the sessions is quality, communication and compassionate cares, with the aim to explore what has been going well, and identify areas where improvement is needed. This will include sharing lessons learned from serious incidents and the associated action plans. Acuity and dependency data collection using the Mental Health Optimal Staffing Tool (MHOST) commences Monday 27 July 2020 for a 20 day data collection period.

- 6 This month Griffin and CAMHS inpatient unit utilised over 6% agency staff, the reduction in the number of wards utilising over 6% agency staff reflects the reduced overall temporary worker and agency use across the Trust.
- 7 Number of occupied beds, temporary workforce percentage together with the NSIs that capture outcomes most affected by nurse staffing levels is presented in the tables per inpatient area by service and directorate in Annex 2.

Community Teams

- 8 Summary of community 'areas to note';

Community team	April 2020	May 2020	June 2020
City East Hub- Community Nursing	X	X	X
City West Hub- Community Nursing	X	X	X
East Central Hub – Community Nursing	X	X	
Hinckley and Bosworth – Community Nursing	X		
Healthy Together – City (School Nursing only)	X	X	X
Healthy Together – East	X		
Health Together - West	X	X	
CAMHS County - FYPC		X	X
Diana service	X	X	X

Table 4 – Community areas to note

- 9 Community areas to note are identified either by the Head/Deputy Head of Nursing due to; high percentage of temporary worker/agency utilisation, or concerns relating to; increased case load, high risk patients, staff sickness, ability to fill additional shifts and the impact to safe and effective care.
- 10 CAMHS County, Healthy Together City (School Nursing only) and Diana teams are rated to be at Amber escalation level due to only 70% of the established team being available to work. Risks continue to be monitored within the Directorate on a weekly basis.

- 11 There remain a number of vacancies across community planned care nursing hubs with City East and West carrying the largest number and key 'areas to note'. Due to the numbers of vacancies, the teams have an increased reliance on temporary workforce with a high agency use; there are associated challenges with continuity of the workforce, especially in City East.

A city only advert for band 5's with a recruitment and retention premia attached has gone back out. City staff nurse interviews took place on 9 July 2020 with 5 offered interviews, 1 attended who was successful. Of the 13 students nurses who were recruitment in March 2020 only 7 appear to be progressing to start dates, after subsequently being offered posts within UHL. For the Ageing Well agenda posts staff have been recruited for East Central, East South and North West Leicester. Interviews for other county areas are taking place on 21st July 2020.

- 12 There are no 'areas to note' in MH in June 2020 the Central Access Point (CAP) is experiencing some staffing shortages and this is resulting in increased pressure on the community mental health teams and the crisis resolution and home treatment team to provide cover. This is on the risk register and a plan is in place to address the shortages.

The impact of Covid-19 and local lockdown measures in Leicester City has continued to affect the community teams throughout June. Face-to-face contacts remain suspended wherever possible, and telephone and video appointments are now offered. A pilot of Attend Anywhere video consultation has been successful and is being rolled out across teams. The exception to this approach is where face-to-face contacts are unavoidable, for example depot administration, Mental Health Act assessments and safeguarding issues etc. Services that paused their clinical work to support core services are working to resume, for example psychological therapy services and the Recovery College.

Conclusion

- 13 In light of the triangulated review of workforce metrics, nurse sensitive indicators and patient feedback, the Acting Director of Nursing, AHPs and Quality is assured that there is sufficient resilience across the Trust notwithstanding some areas to note, to ensure that every ward and community team is safely staffed.

Presenting Director: Anne Scott – Acting Director of Nursing, AHPs and Quality

Author: Emma Wallis – Associate Director of Nursing and Professional Practice

Annexe 1: Inpatient Ward triangulation staffing and NSIs.

Trust thresholds are indicated below;

- Temporary worker utilisation (bank and agency);
 - green indicates threshold achieved less than 20%
 - amber is above 20% utilisation
 - red above 50% utilisation

- Quality Schedule methods of measurement are RAG rating;
 - B – Less than 6% of clinical posts to be filled by agency staff
 - Red above 6% agency usage

Adult Mental Health and Learning Disabilities Services (AMH/LD)

Acute Inpatient Wards

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
Ashby	85.2%	11.49%	0.73%	10.76%	0↓	0↓	0
Aston	97.9%	12.98%	1.56%	11.42%	0↓	4↓	0
Beaumont	27.8%	6.91%	2.30%	4.61%	1↑	2↓	0
Belvoir Unit	69.3%	24.09%	2.20%	21.89%	1↑	0↓	0
Heather	95.9%	20.40%	2.12%	18.28%	1↑	3↓	0
Thornton	87.5%	14.41%	0.43%	13.98%	1↑	0→	0
Watermead	89.2%	17.40%	1.15%	16.25%	1↑	6↑	0
Griffin F PICU	77.8%	32.94%	8.45%	24.49%	0↑	1→	0
TOTALS					5↓	16↓	0

Table 5 - Acute inpatient ward safe staffing

A review of the NSIs and patient has not identified any staffing impact on the quality and safety of patient care/outcomes. There was a decrease in falls across the acute in-patient wards with the exception of Watermead Ward and a decrease in medication errors this month, no themes were identified though analysis in terms of cause or lessons to be learned.

Learning Disabilities (LD) Services

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
Agnes Unit	50.00%(Pod 1) 93.3%(Pod 2) 54.2%(Pod 3)	24.36%	2.50%	21.86%	1↓	0→	0
The Gillivers							
The Grange							

Table 6 - Learning disabilities safe staffing

No data for short breaks as temporarily closed.

A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes. The Agnes Unit is supported with a quality improvement plan as detailed on page 5 of this report.

Low Secure Services – Herschel Prins

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
HP Phoenix	91.7%	5.51%	0.17%	5.34%	0↓	0→	0↓

Table 7- Low secure safe staffing

There were no medication errors, falls or complaints in June 2020.

Rehabilitation Services

Ward	Occupied beds	Temp Workers %	Agency %	Bank %	Medication errors	Falls	Complaints
Skye Wing	89.6%	14.67%	0.57%	14.10%	3↑	4↓	0
Willows Unit	- (Cedar) 84.6% (Maple) 94.7% (Sycamore) 98.3% (Acacia)	5.35%	0.00%	5.35%	1↑	0↓	0
Mill Lodge	87.4%	30.79%	1.34%	29.45%	1↑	13↓	0
TOTALS					5↑	17↓	0↓

Table 8 - Rehabilitation service safe staffing

A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes.

The number of reported medication error incidents increased to five in June 2020 from two in both April and May 2020. It is noted that the number of nursing administration errors has not increased, and the number of reported incidents for the whole of Quarter 1 in 20/21 is reduced compared to Quarter 4 19/20. None of the reported incidents had a link to staffing levels or skill mix. The matron continues to monitor the number of recording errors going forward, including thematic review and monitor the process led errors/near misses over Quarter 2.

Analysis of the falls has demonstrated that there is no indication that any fall was linked to staffing numbers or skill mix. Based on the incident information reviewed, the following themes were identified over the last quarter including this month:

- Falls experienced due to symptoms of Huntingdon’s Disease (HD)
- Exacerbation of HD symptoms due to anxiety.
- Agitation and confusion
- Effects of PRN medication
- Effects of physical health

- Communication method (HD) or ways of responding to distress, anxiety moving away from the bed
- Behaviour of lowering self to floor if feels will fall and reluctance to use nurse call before transfers

Community Health Services (CHS)

Community Hospitals

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
FP General							
MM Dalgliesh	56.5%	6.87%	3.03%	3.84%	0↓	4↑	0
Rutland	64.9% ⁰	13.25%	4.50%	8.75%	1→	4↓	0
SL Ward 1	69.2%	9.70%	4.11%	5.59%	1→	3↑	0
SL Ward 3	59.8%	15.20%	3.62%	11.58%	1→	2↓	0
CV Ellistown 2	57.9%	2.02%	0.48%	1.54%	1→	0↓	0
CV Snibston 1	49.3%	5.22%	1.63%	3.59%	1→	1↓	0
HB East Ward	33.8%	5.29%	2.12%	3.17%	1↓	6↑	0
HB North Ward	18.9%	6.74%	1.39%	5.35%	0→	0↓	0
Swithland	71.1%	2.78%	0.64%	2.14%	0↓	5↑	0
CB Beechwood	52.5%	7.38%	1.11%	6.27%	0↓	2↑	0
CB Clarendon	46.5%	6.48%	0.89%	5.59%	2↑	4↑	0
TOTALS					8↓	31↓	0↓

Table 9 - Community hospital safe staffing

As part of the COVID 19 zoning plans East Ward at Hinckley and Bosworth Community Hospital site has been identified as the Red site for COVID 19 positive symptomatic patients. North ward has been identified as the second red ward which ensures that this site remains a red site and reduces risk of transmission and supporting the use of staff across the two red wards. Due to the low numbers of COVID 19 positive patients requiring a community hospital bed, North Ward temporarily stopped admissions on the 17th June 2020.

The trust made the decision to temporarily suspend admissions to Feilding Palmer Hospital (FPH) on the 14 May 2020 this was in response to national COVID-19: infection, prevention and control guidance and to ensure patient and/or staff safety is not compromised and safety is prioritised. This remains under review by the trust.

There has been an overall reduction in the usage of temporary workforce this has been impacted by the reduced bed occupancy and the review of staffing requirements on a shift by shift basis.

A review of the NSIs for the community hospital wards has identified that there was a slight decrease overall in falls incidents from May to June 2020. Review of the increased incidences has not identified any direct correlation between staffing and the impact to quality and safety of patient care/outcomes.

The number of medication incidents for June 2020 has reduced to 8 for the inpatient wards. A review of these incidents has not identified any direct correlation with staffing; however there is a theme in relation to failure of staff to follow medication process, discrepancy in counted medicine and lost/misplaced medication. Matrons are working with the teams to ensure lessons are learned.

Mental Health Services for Older People (MHSOP)

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
BC Kirby	94.2%	17.74%	0.96%	16.78%	2↑	8↓	0
BC Welford	85%	23.25%	2.35%	20.90%	0→	7↓	0
Coleman	46.2%	38.97%	4.78%	34.19%	0→	5↓	0
Gwendolen	23.8%	2.13%	1.33%	0.80%	0→	2↓	0
TOTALS					2↑	22↓	0→

Table 10 - Mental Health Services for Older People (MHSOP) safe staffing

Gwendolen ward was temporarily closed to allow for refurbishment work to be undertaken from 8th June to 15th June 20. Gwendolen ward now consists of an amber zone for all new admissions/transfers from the acute hospital to the service, and a Red Zone to nurse COVID 19 positive patients in MHSOP. Staff from Gwendolen ward were redeployed to other wards within MHSOP when occupancy was low.

Coleman ward was extended into Wakerley ward as part of the surge plan for mental health organic patients. This led to an increased use in bank and agency staff due to the extended space, patient acuity and dependency, increased levels of observation and staff absence due to 'shielding'. Staff from other MHSOP inpatient wards were redeployed to Coleman/ Wakerley ward as well as block booking bank and agency Staff. There was 5 falls relating to 4 patients on Coleman ward and there was 5 falls on Wakerley ward relating to 4 patients. A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes.

Welford ward has patients with both functional and organic illness. There was a reliance on temporary workforce to meet the safe staffing numbers due to increased acuity, 1:1 observations, and redeployment of substantive staff to support Coleman/Wakerley ward. There was 7 falls relating to 5 patients. A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes

Kirby ward catered for patients with both functional and organic illness. There was a reliance on temporary workforce to meet the safe staffing numbers due to increased acuity, 1:1 observations, staff members shielding and redeployment of substantive staff to support Coleman/Wakerley ward. There was 8 falls relating to 5 patients. A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes

Families, Young People and Children's Services (FYPC)

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
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Langley	77.8%	38.86%	2.01%	36.85%	0↓	0→	0
CAMHS	77.8%	30.89%	7.75%	23.14%	0→	0↓	0
TOTALS					0↓	0↓	0→

Table 11 - Families, children and young people's services safe staffing

There were no medication errors, falls or complaints in June 2020. The increased temporary worker utilisation for both Langley and CAMHS is reflective of deployment of temporary staff to meet vacancies and acuity that in the previous months had been covered by staff redeployed due to COVID.